

ISSUE SLIP STAPLE AREA (for additional cross references)

| P SITION | INITIALS | ID NO. | DATE |
|---------------------|----------|---------|---------|
| FEE DETERMINATION | 10/19 | | 2-23-99 |
| O.I.P.E. CLASSIFIER | | | 3-24-99 |
| FORMALITY REVIEW | | 1005674 | 3-25-99 |

INDEX OF CLAIMS

| | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — | (Through numeral) Canceled | A | Appeal |
| - | Restricted | O | Objected |

| Final | Original | Claim |
|-------|----------|-------|
| 1 | 16 | ✓ |
| 2 | 21 | ✓ |
| 3 | 24 | ✓ |
| 4 | 25 | ✓ |
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| Claim | | Date | | | | | |
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| Final Original | | | | | | | |
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| Claim | | Date |
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**If more than 150 claims or 10 actions
staple additional sheet here**

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